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SELECTED TRANSLATIONS ON PUBLIC HEALTH IN EAST GERMANY AND CZECHOSLOVAKIA

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#### FOREWORD

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# SELECTED TRANSLATIONS ON PUBLIC HEALTH IN EAST GERMANY AND CZECHOSLOVAKIA

[Following are translations on the above subject, selected from <u>Das Deutsche Gesundheitswesen</u> (The German Public Health Service), Vol XV, No 49/50, Fast Berlin, 15 December 1960]

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### TOXOPLASMOSIS AND PNEUMOCYSTOSIS AS AN ANTHROPOZOONOSIS

#### - Czechoslovakia -

[Following is the translation of the summary of an article by Otto Jirovec in <u>Das Deutsche Gesundheitswesen</u> (The German Public Health Service), Vol XV, No 49/50, East Berlin, 1960, page 2387]

In summary, we can say the following: toxoplasm gendii and pneumocystis carinii occur as a latent widespread infection in man and in warm-blooded animals all over the world. Only under special circumstances do these latent infections lead to a clinically manifested disease which in this case often is severe, sometimes fatal. Both infections and diseases are classed as anthropozoonoses and also as infections from natural foci in the terms of Pavlovskiy. In toxoplasmosis, postnatal infections occur almost exclusively by transmission from synanthropic mammals and birds which live in the environment of man, or from wild animals with which man has closer contact. In congenital toxoplasmosis the mother carrying a latent infection is the source of infection for the child. In pneumocystosis the parasites are rarely transmitted from synanthropic mammals to man, and the main source is believed to be the adult human being, an older child, or a diseased infant.

The effect of latent toxoplasmic infection upon the state of health of human beings requires thorough investigation. In pneumocystosis, besides IPP (interstitial pneumocystic pneumonia) in infants, it is especially the complications in chronic manifestations caused by the fact that the resistance of the host is lowered because of acute manifestations of pneumocystic pneumonia which merit the full attention of the scientist and the practicing physician. A close cooperation of clinicians with parasitologists and veterinarians is absolutely essential.

Address of author: Prof. Dr. O. Jirovec, Department of Parasitology, Zoological Institute of Karlova University, Prague, Czechoslovakia.

### ANTHRAX AS A CHILDREN'S DISEASE

- East Germany -

[Following is the translation of the summary of an article by R. Maschke in <u>Das Deutsche Gesundheitswesen</u> (The German Public Health Service), Vol (V, No 49/50, East Berlin, 1960, page 2419]

Summary

After a brief discussion of the etiology, epidemiology, and nosology of anthrax, the author reports on a case of anthrax edema in a child which resulted in recovery after intensive treatment with antibiotics. The diagnosis was confirmed by live animal and culture tests. In conclusion, the differential diagnosis for the manifestation of the disease is discussed.

## CHEMOTHERAPY OF TUBERCULOSIS OF THE LUNGS WITH ULTRASCHALL AEROSOLS

- East Germany -

[Following is the translation of the summary of an article by A. Schmiedel, U. Ermisch and G. Doerfel in <u>Das Deutsche</u> <u>Gesundheitswesen</u> (The German Public Health Service), Vol XV, No 49/50, East Berlin, 1960, page 2434.]

Summary

Preparations from resections of the lungs were examined as to their content of tuberculostatica which had been inhaled by the patients shortly before the operation as ultraschall aerosols. The resulting figures, compared with the blood level, were a basis for conclusions as to the speed with which the chemotherapeutic substances passed through. Whereas INH (Isonicotinic hydraced) showed a higher level in the tissue than in the blood only for the first two hours, glucose INH aerosol made it possible to create lasting chemotherapeutic deposits in the lungs. Tebethion solubile usually irritates the bronchi. Streptomycin also stays in the lungs for some time. In the tuberculous caseous substance there was less therapeutic matter than in the well-aired lung tissue. The use of a room aerosol device is described which would make simultaneous inhalation by a large number of patients possible.